Cetrorelix is applied starting on cycle day 6 to 10 and ovulation can be induced between day 9 - 16 of the menstruation cycle.

31. (Amended) The method according to claim 15 wherein native LHRH or a LHRH agonist are given to avoid luteal phase [supplementation] stimulation in preventing negative effects of HCG during the luteal phase.

REMARKS

With entry of this amendment, claims 15-16 and 18-32 are pending. Reconsideration is requested.

Claims 15-20 and 23-32 were rejected under 35 USC § 112, second paragraph, as being indefinite. The Examiner indicated that the expression "low" in claim 15 is indefinite. The claim has been amended to remove this term. Withdrawal of this portion of the rejection is respectfully requested.

The Examiner indicated that the parenthetical expressions in claims 18 and 19 are improper. Claims 18 and 19 have been amended to delete the parenthetical expressions. Withdrawal of this portion of the rejection is respectfully requested.

The Examiner indicated that the phrase "the LHRH antagonist" in claim 25 lacked antecendent basis. Claim 25 has been rewritten as claim 33 and is submitted to be free of this rejection.

Claim 26 has been amended to correct improper dependency.

It is believed that the presently pending claims are free

of § 112, second paragraph rejections.

Claims 17, 20 and 31 were rejected under 35 USC § 112, first paragraph, as not being enabled by the specification. Claim 17 has been cancelled, thereby rendering that portion of the rejection moot. Claim 20 has been amended to recite a dosage amount of about 0.25 mg per day or higher. Support for the amendment can be found at page 6, line 5 of the specification. Claim 31 has been amended to correct a clerical error. Support can be found in originally filed claim 8. In view of the amendments, reconsideration and withdrawal of the rejection are respectfully requested.

Claims 15-20 and 23-32 were rejected under 35 USC § 103(a) as being unpatentable over Diedrich et al. in view of Felberbaum et al. Applicants previously submitted the Declaration of Klaus Diedrich, a named inventor on the present application and an author of the Felderbaum et al. reference cited in the § 103(a) rejection. The Diedrich Declaration established that the coauthors on the Felderbaum publication who are not named inventors on the present application did not have an inventive role in the presently claimed invention. This Declaration was considered by the Examiner to be insufficient to remove the reference from consideration.

Submitted herewith is a further Declaration signed by all of the inventors of the present application. The new Declaration establishes that the present inventors were inventors of the relevant subject matter disclosed in the

Felderbaum publication, which was disclosed in the publication as a result of the fact that one of the inventors, Klaus Diedrich, was an author of said publication. The Examiner's attention is particularly directed to paragraph 3 of the Declaration and to MPEP 2132.01, wherein it is stated that "Applicant can rebut *prima facie* case by showing reference's disclosure was derived from applicant's own work." Accordingly, it is again submitted that the disclosure in Felderbaum publication was derived from Applicants' own work and cannot be properly cited against the application.

It is respectfully submitted that the primary reference cited by the Examiner (Diedrich et al.) does not teach or suggest the presently claimed invention.

The conclusions of the Diedrich et al article are:

1. The unwanted endogenous LH surge was avoided in all cases.
2. Only about half the amount of menotropins is required compared to the long protocol of GnRH agonists.
3. The use of GnRH antagonist Cetrorelix will be an attractive means for ovarian stimulation in the future.
4. The optimum regimen will be decided in further studies.
5. In the study, the authors were unable to reach a conclusion regarding the FSH suppression.

The present invention clearly defines an improved multiple dosage regimen with only 0.1 to 0.5 mg of Cetrorelix/day or a single or dual dosage in the range of preferably 2 mg to 6 mg.

Should be in claims

Furthermore, the Diedrich reference does not teach selective suppression of LH without affecting FSH secretion. Therefore, an advantage of the Cetrorelix treatment is that it does not affect the development of individual estrogen levels.

It should also be noted that the Diedrich et al. publication only teaches a pregnancy rate of 15%, and does not disclose whether any healthy babies were born. In contrast, the present invention has resulted in 71 pregancies in 235 patients (a rate of 30%), with 16 pregnancies ongoing and 44 healthy children born.

For all of the above reasons, withdrawal of the 35 USC § 103 rejection is respectfully requested.

Claims 21-22 were rejected as being anticipated by Diedrich et al. This rejection is traversed for the following reasons.

Claims 21-22 recite an improved dosage regimen in which Cetrorelix is applied starting cycle day 1 to 10 and ovulation can be induced between day 9 to 20 of the menstruation cycle or in which Cetrorelix is applied starting cycle day 4 to 8 and ovulation can be induced between day 9 and 20 of the menstruation cycle. There is no teaching in the cited reference of these specific regimens. Accordingly, the reference fails to teach each and every element of the claimed invention, as is required for a rejection under 35 USC § 102. Withdrawal of the rejection is respectfully requested.

All objections and rejections having been addressed, it is

submitted that the application is in condition for allowance, and Notice to that effect is respectfully requested.

Respectfully submitted

Pillsbury Madison & Sutro LLP

By _____

Ann S. Hobbs, Ph.D.
Reg. No. 36,830
Tel. No.: (202) 861-3063
Fax No.: (202) 822-0944

1100 New York, Avenue, N.W.
Ninth Floor
Washington, D.C. 20005-3918
(202) 861-3000